## PART B - FEE(S) TRANSMITTAL

DSTELLCTIONS: The form should be used for transmitting the ISSUE FEE and PEUBLICATION FEE (if require). Blocks I through 5 should be completed when indicated unless correctly below or dragge of the property		DEC 0.5 2006	ther with applicable	C P A or <u>Fax</u> ( <u>\$</u>	ommissioner for .O. Box 1450 lexandria, Virgin 571)-273-2885	Patents ia 22313-1450		
Note: A certificate of mailing can only be used for domestic mailings of the group of the part of the	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directly otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.							
KENNETH E. LEEDS P.O. BOX 2819 SUNNYVALE, CA 94087-0819  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 10/308,089  O3/23/2004 Michinobu Suckane AK2-C2 7098  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/308,089  O3/23/2004 Michinobu Suckane AK2-C2 7098  APPLICATION NO. STAUD ATTORNEY DOCKET NO. 10/308,089  O3/23/2004 Michinobu Suckane AK2-C2 7098  APPLIN TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. FAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE Non-provisional NO. \$1400 \$30.00 \$50 \$1700 \$12/15/2006  EXAMINER: ART UNIT CLASS-SUBCLASS 12/86/2086 \$700LTICE 086008002 \$1888889\$  RICKMAN, HOLLY C 1773 428-28000 \$1 \$1.00 \$	CURRENT CORRESPOND	ENCE ADDITION (Note: Use B	, ,	Fo pa	e(s) Transmittal. This pers. Each additional p	certificate cannot be used for paper, such as an assignmen	or any other accompanying	
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APPLICATION NO.   FILING DATE	Y			· []	Kenneth E.		(Depositor's name)	
APPLICATION NO.   FILING DATE	•			<u> </u>	<u> </u>		(Signature)	
Michinobu Suekane   AK2-C2   7098		· ·		U	November 30	2006	(Date)	
APPLN TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE non, provisional NO \$1400 \$300 \$0 \$1700 12/15/2006  EXAMINER ART UNIT CLASS-SUBCLASS 12/86/2086 YPOLITE2 88608982 188888989  RICKMAN, HOLLY C 1773 428-828000 81 Fc; 15:91 1/686-809 89  I. Change of correspondence address or indication of "Fee Address" (37 CFR 1,363). 363. 68 dp (1) the names of up to 3 registered patent attorneys or agents and with the printed on PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Komag, Inc.  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual © Corporation or other private group entity Government of Province of the Country of the Patent of the printed of the patent): Individual © Corporation or other private group entity Government of Province of the Country of the Patent of the printed on the patent): Individual © Corporation or other private group entity Government of the Patent of Copies Graph and the names of up to 3 registered patent attorneys or agents. If no name is 18 control of the printed on the patent of the printed	APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	OR A	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
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RICKMAN, HOLLY C 1773 428-828000 81 FC;1521  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).    Change of correspondence address (or Change of Correspondence Address for Proc May 122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Komag, Inc.  San Jose, California  4b. Payment of Fec(s): (Piease first reappiy any previously paid issue fee shown above)  A check is enclosed.  A check is enclosed.  A check is enclosed.  A check is enclosed.  A payment of Fec(s): (Piease first reappiy any previously paid issue fee shown above)  A check is enclosed.  The Director is herby sutthorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  So Change in Entity Status (from status indicated above)  A Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United Bates Patent and Trademark Office.	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSUE I	FEE TOTAL FEE(S) DUE	DATE DUE	
RICKMAN, HOLLY C 1773 428-828000 91 FC:1531  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).    Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.   The Address of indication (or "Fee Address" Indication form PTO/SB/122) attached.   The Address of indication (or "Fee Address" Indication form PTO/SB/122) attached.   The Address of indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: The Susue Fee  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Komag, Inc.    San Jose, Califorinia	nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/15/2006	
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication form PTO/SB/13; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Komag, Inc.  San Jose, Califorinia  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  4a. The following fee(s) are submitted:  San Jose, Califorinia  4b. Payment of Fee(s): (Piease first reapply any previously paid issue fee shown above)  Advance Order - # of Copies	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).					_	300.00 OP	
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(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  San Jose, California  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  4a. The following fee(s) are submitted:    Ab. Payment of Fee(s): (Piease first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  5. Change in Entity Status (from status indicated above)   a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.   b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.								
Komag, Inc.  San Jose, California  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  4a. The following fee(s) are submitted:  San Jose, California  4b. Payment of Fee(s): (Piease first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment of Fee(s): (Piease first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).  Change in Entity Status (from status indicated above)  a Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  Do Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
Please check the appropriate assignee category or categories (will not be printed on the patent):	(A) NAME OF ASSI	GNEE .	<u> </u>	(B) RESIDENCE: (CIT	Y and STATE OR CO	UNTRY) -		
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Solution See (No small entity discount permitted)  Advance Order - # of Copies	Please check the appropr	iate assignee category or	r categories (will not be pr	inted on the patent):	Individual 🗵 Corp	poration or other private grou	p entity Government	
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Typed or printed name Kenneth E Leeds Registration No. 30,566		1 Cm h	lld					
	Typed or printed nam	Kenneth E	Leeds		Registration No.	30,566		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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